Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

		Liteot			10ta	69	(12					
CLAIMS AS			S FILED - PART I (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			14					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			(Ψ minus 20=		* 8			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			J minus 3 = * 6			,		X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PI			RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL		OR	TOTAL	T70
CLAIMS AS AMENDED - PART II										]	OTHER	
		(Column 1)	(Column 2)			(Column 3)	mn 3) SMALL E			OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- C1 A184	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\	+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)	AL	DIT. FEE		,	ADDII. FEL	:				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGH NUME PREVIC PAID I	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	CLAIM	=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=	:	OR	+290 <sup>-</sup>	
								TOTAL DIT. FEE		or ,	TOTAL ADDIT. FEE	
		(Column 1)	_									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA	1	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	;	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=			X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 2								+145= 		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ber Previously Paid					r found	in the app	ropriate box	in coli	umn 1.	